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Debtor 1  Debtor 2 (Spouse, if filing)		Middle Name La	EE Nome st Name Eastern Division	ROSE TO A TO	Production of the control of the con	Check if this amended filing
e as complete and a complete a complete and a complete and a complete and a complete and a complete a complete and a complete	ntion to Ha	hie if two married poonly	apter 7 Filing are filing together, both are e to this form. On the top of any			12/1 ying correct name and case nur
What is the si Your family inc spouse, and a on Schedule J Expenditures of	ize of your family? cludes you, your ny dependents listed : Current	Check all that apply:  You Your spouse Your dependents	2 How many dependents?	3 Total number o	fracel	
your spouse is if your spouse  Do not include income if you a	me.  Douse's income if living with you, even is not filing.  Your spouse's tre separated and	value (if known) of any no that you receive, such as	r spouse's income. Include the n-cash governmental assistance food stamps (benefits under the ssistance Program) or housing	You	That po monthi (take-h	erson's average ly net income ome pay) 1,010.00
your spouse is not filing	not many with you.	Subtract any non-cash go	out Schedule I: Your Income, see	Your spouse	. + \$	362.00
		included above.  Your family's average i		Total	<b>-</b> \$	648.00
Do you receive governmental	e non-cash assistance?	No ✓ Yes. Describe	Type of assistance FOOD STAMPS			
ncrease or dec	your family's ly net income to crease by more than next 6 months?	No Yes. Explain				
nstallments wi	hy you are unable to p thin 120 days. If you ha	pay the filing fee in ave some additional able to pay your filing	Lack of funds . Single pa	arent		

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Deb	otor 1	CARMELIA First Name M	liddle Name	Last N	LEE	*****	_	Case numbe	Bf (if known)	
P	art 2	54 <b>5</b> 1			nthly Expens	26				
	Ectin				y andpend					
0.	Includ	nate your average of the amounts paid by ted on line 2.			tance that you	\$	1,	444.00		
	If you line 2	have already filled 2 from that form.	out Schedule	J, Your	Expenses, copy		Waataa aa a			
	who i	ese expenses cov s not included in y ported in line 1?		V No Ye	s. Identify who					
	regula exper If you Sched	anyone other thar arly pay any of the nses? have aiready filled dule I: Your Income, rom line 11.	<b>se</b> out	☑No □Ye		you re	gularly receiv	e as contribution	s? \$ mor	sthly
	monti decre	u expect your ave nly expenses to inc ase by more than ext 6 months?	crease or	✓ No Yes	s. Explain					
Pa	nt 3:	Tell the Cou	rt About Yo	our Prop	erty					
If y	ou ha	ive already filled o this application a	ut <i>Schedule</i> and go to Pa	A: Real rt 4.	Property (Offic	ial Fon	m B 6A) and	Schedule B: Pe	rsonal Property (O	fficial Form B 6B), attach
3	Ex <i>amp</i> your w	nuch cash do you oles: Money you hav allet, in your home, when you file this ap	ve in and on	Cash:		\$	- MARKET STATE OF THE STATE OF			
	Bank a	accounts and othe	r deposits			Institu	ution name:			Amount:
į	Examples: Checking, money market, or oth		ngs,	Checking	account:		200 - 100 -		· · · · · · · · · · · · · · · · · · ·	\$
accounts; certif		nts; certificates of de in banks, credit uni	eposit;	Savings a	account:					\$
t	brokerage houses, ar similar institutions. If		ner	Other fina	ancial accounts:					\$
more than one acco same institution, list		nan one account wit	th the Do not	Other fina	ancial accounts:		·	1	PALL TO THE PARTY OF THE PARTY	\$
		ome? (if you own it	outright or						entrus como que en magray An en antimonimo per el se co	a contract the state of the sta
	_ •	chasing it) les: House, condom		Number	Street			· · · · · · · · · · · · · · · · · · ·	Current value:	\$
		ictured home, or mo		City			State	ZIP Code	Amount you owe on mortgage and liens;	\$
13. C	)ther i	real estate?								
			,	Number	Street				Current value:	\$
			;	City			State	ZIP Code	Amount you owe on mortgage and liens:	\$
14. T	he ve	hicles you own?		Make:				Name of the second of the seco	110115.	manado de 191 a 1910 mente de 1911 de 1
E	хатрі	es: Cars, vans, trucks.		Model:			-		Current value:	\$
s tr	ports ( actors	itility vehicles, moto , boats	reveloe	Year:			-		Amount you owe	
-		,	-	Mileage			-		on liens:	\$
			I	Make:	···········		-			
				Model:	W		-		Current value:	\$
				Year: Mileage					Amount you owe on liens:	\$
				-			•		on none.	· · · · · · · · · · · · · · · · · · ·

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Debtor 1 CARMELIA First Name Middle Name	LEE Case number (if known)	
15. Other assets?  Do not include household items and clothing.	Describe the other assets:  Current value:  Amount you owe on liens:	\$ \$
16. Money or property due you?  Examples: Tax refunds, past due or lump sum alimony, spousal support, child support, maintenance, divorce or property settlements, Social Security benefits, Workers' compensation, personal injury recovery	s	ou believe you will likely receive nent in the next 180 days? lo es, Explain:
17. Have you paid anyone for services for this case, including filling out this application, the bankruptcy filling package, or the schedules?	No Yes. Whom did you pay? Check all that apply:  An attorney A bankruptcy petition preparer, paralegal, or typing service  Someone else	How much did you pay?
Have you promised to pay or do you expect to pay someone for services for your bankruptcy case?	No Yes. Whom do you expect to pay? Check all that apply: An attorney A bankruptcy petition preparer, paralegal, or typing service Someone else	How much do you expect to pay?
19. Has anyone paid someone on your behalf for services for this case?	Yes. Who was paid on your behalf? Check all that apply:  ☐ An attorney ☐ A bankruptcy petition preparer, paralegal, or typing service ☐ Someone else ☐ Someone else ☐ Someone else ☐ Someone else ☐ Who paid? Check all that apply: ☐ Parent ☐ Brother or sister ☐ Friend ☐ Pastor or clergy ☐ Someone else ☐ Someone else	How much did someone else pay?
20. Have you filed for bankruptcy within the last 8 years?	No Yes. District  When MM/ DD/ YYYY  District  When MM/ DD/ YYYY  Case number MM/ DD/ YYYYY  Case number MM/ DD/ YYYYY	
Part 5: Sign Below	District When Case numl	ber
By signing here under penalty of perithat the information I provided in this  X  Signature of Debtor 1  Date  MM / DD / YYYY	arry, I declare that I cannot afford to pay the filing fee either in full or in installing place and correct.     20	ments. I also declare

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First Name			
	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for t	the:Northern Distric	t of Illinois, Eastern Divisior	·
		···	First Name Middle Name Last Name ankruptcy Court for the: Northern District of Illinois, Eastern Division

#### Order on the Application to Have the Chapter 7 Filing Fee Waived

After considering the debtor's <i>Application to Have the Chapter 7 Filing Fee M</i> orders that the application is:	Vaived (Official Form B 3B), the court
[ ] Granted. However, the court may order the debtor to pay the fee in the fee	uture if developments in

administering the bankruptcy case show that the waiver was unwarranted.

[ ] Denied. The debtor must pay the \$306 filling fee according to the following terms:

	You must pay	On or before this date		
	\$	Month / day / year		
	\$	Month / day / year		
	\$	Month / day / year		
	+ \$	Month / day / year		
Total	\$	monuri day i yeas		

If the debtor would like to propose a different payment timetable, the debtor must file a motion promptly with a payment proposal. The debtor may use *Application for Individuals to Pay the Filing Fee in Installments* (Official Form B 3A) for this purpose. The court will consider it.

The debtor must pay the entire filing fee before making any more payments or transferring any more property to an attorney, bankruptcy petition preparer, or anyone else in connection with the bankruptcy case. The debtor must also pay the entire filing fee to receive a discharge. If the debtor does not make any payment when it is due, the bankruptcy case may be dismissed and the debtor's rights in future bankruptcy cases may be affected.

[	]	Scheduled	for	hearing.
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A hearing to consider the debtor's application	n will be held
on at AM / PM a	at
Month / day / year	Address of courthouse
If the debtor does not appear at this hearing,	the court may deny the application.
By the co	ourt:
Month / day / year	United States Bankruptcy Judge